HAND DELIVERED

No No	Yes	child because	sactions, or liabilities of a spouse or dependent	"income, tran	EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?
□ No ⊠	Yes	trusts" need not	s of Official Conduct and certain other "excepted pouse, or dependent child?	on standards	TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
SNOI	UESTI	FTHESE Q	MATION — ANSWER EACH O	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS
and the esponse.	wered Yes" r	must be ans ed for each '	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	§ ⊠	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.
	Yes	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	No	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.
	Yes	or before the date	Vill. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	N _S	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.
	Yes	t receive any the reporting	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule VII.	<i>§</i>	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.
No X	Yes	receive any regating more	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	§ ⊠	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes If yes, complete and attach Schedule I.
			E QUESTIONS	OF THES	PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	ity shall ie who fi	A \$200 penal against anyon 30 days late.	or Employing Office: se Termination Date:	Officer or Employee	Status Member of the U.S. State: 15 Annual (May 15) Status State: 15 Annual (May 15) State: 16 Annual (May 15)
nly)	(Office Use Only)	(Offi	(Daytime Telephone)		(Full Name)
TOTAL IN PRINTED	en de la companya de	270	(200) 25-4365		CHARLES B. FANGEL
	·		Form A For use by Members, officers, and employees		UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period

BLOCK A

Asset and/or Income Source

instruction booklet. Block A. For additional of its activities, and its geographic location traded, state the name of the business, the nature period. For an active business that is not publicly account and its value at the end of the reporting reporting threshold. For retirement plans that are land, provide a comptete address. Provide full od, and (b) any other asset or sources of income which generated more than \$200 in "unearned" exceeding \$1,000 at the end of the reporting periduction of income with a fair market value Identify (a) each asset held for investment or pronot self-directed, name the institution holding the each asset in the account that exceeds provide the value and income information (i.e., plans in which you have the power, even if plans (such as 401(k) plans) that are self directed income during the year. For rental property or not exercised, to select the specific investments), ticker symbols). For **all IRAs** and other retirement names of stocks and mutual funds (do not use information, see Te 8

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asset is sold, portion of an If only a

as follows: please indicate

(S) (partial)

Government retirement programs. parent, or sibling; any deposits totalling \$5,000 or your spouse, or by you or your spouse's child, **Exclude:** Your personal residence(s) (unless there is rental income); any debt owed to you by interest in or income derived less in personal savings accounts; any financial 103

dependent child (DC) or is jointly held (JT), in the optional column on the far left. or income source is that of your spouse (SP) If you so choose, you may indicate that an asset 9

None

\$1 - \$1,000

\$15,001 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$250,000

\$250,001 - \$500,000

\$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000

\$25,000,001 **-** \$50,000,000

EXCEPTED/BLIND TRUST

(Specify: For Example, Partnership Income or Farm Income)

example. See below for

Other Type of Income

Over \$50,000,000

DIVIDENDS

INTEREST

CAPITAL GAINS

NONE

RENT

None

\$1 - \$200

\$201 - \$1,000

\$1,001 - \$2,500

\$2,501 - \$5,000

\$15,001 ~ \$50,000

Over \$5,000,000

\$50,001 - \$100,000 \$100,001 - \$1,000,000

\$15,000

\$1,000,001 - \$5,000,000

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\$5,001 -

G.

(partial)

\$1,001 - \$15,000

DC, ş

Examples:

Mega Corp. Stock

Simon & Schuster

Indefinite

Royalties

Ş.

ist Bank of Paducah, KY Accounts

Value of Asset BLOCK B

please specify the method used method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close

year and is included only because if If an asset was sold during the reporting generated income, the value should be

<u>o</u> all other assets including all IRAs

BLOCK C

ate any income during calendar year Check "None" If asset did not gener vested, should be listed as income. Dividends and interest, even if rein indicate the type of income by checkinvestments, you may write "NA." For not allow you to choose specific Check all columns that apply. For retirement plans or accounts that do ing the appropriate box below

Type of Income

checking the appropriate box below. vested, should be listed as income Check "None" If no income was received Dividends and interest, even if rein-For retirement plans or accounts that do not allow you to choose specific investindicate the For all other assets, including all IRAs, ments, you may write "NA" for income. category of income by

exceeding

\$1000 in

eporting year.

Amount of Income BLOCK D

exchanges (E) sales (S), or purchases (P) Indicate if the Transaction asset had BLOCK III

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Page and

Continuation Sheet (if needed)

DC, 83 Asset and/or Income Source BLOCK A None Œ \$1 - \$1,000 O \$1,001 - \$15,000 ۵ \$15,001 - \$50,000 Value of Asset m \$50,001 - \$100,000 Year-End BLOCK B л G H \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 _ \$5,000,001 - \$25,000,000 : \$25,000,001 - \$50,000,000 Ė, Over \$50,000,000 NONE DIVIDENDS RENT INTEREST of Income BLOCK C Type **CAPITAL GAINS** EXCEPTED/BLIND TRUST Other Type of income (Specify) None \$1 - \$200 Amount of Income \$201 - \$1,000 \$1,001 - \$2,500 < \$2,501 - \$5,000 ۷ \$5,001 - \$15,000 MAIIA \$15,001 - \$50,000 \$50,001 - \$100,000 \bar{x} \$100,001 - \$1,000,000 × \$1,000,001 - \$5,000,000 Over \$5,000,000 Transaction BLOCK E சுல் ந

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SCHEDULE IV— TRANSACTIONS

Name CHACLES B. RABEL Page \$ 0

	Type of Transaction	action	Date (MO/DAY/YR)	œ	C	D A	Amount of	T 0	ran	Transaction	_ On	
that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	PURCHASE SALE	EXCHANGE	or Quarterly, Monthly, or Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	
SP, DC, JT Asset	1											
Example: Mega Coporation C	×	,	10-12-07		×							
Federated Wartet CASC Humital Rand		X	8/31/01			,						
If Morgan U.S. Real Foods had		X	8)3/107									
Chan & Steer Jith Realth fund		X	12							,		
IP Magan Flemm Fitterio MEuropean		X	3/107									
THE Passia And CA		X	8/3/101									
Alliance Penstein Muss Inc. FX		X	4100			`						
Blackrock Equity Fund First.		X	8/31/07									
		,							\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
301 174KSt. Wit # 2217	X						X					
Sumy Isks, Florida 33160												
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Page S &

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor. Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

spouse or dependent child that is totally independent of his or her relationship to you.

Source	(e)arec	City of Departure Cestifiation—	Fordari F.	10001	Member included?
			(Y/N	(Y/N	(Y/N)
Examples: Chicago Chamber of Commerce	imerce Mar. 2	DCChicagoDC	z	z	Z
— Ţ	4	DC-Los Angeles-Cleveland	Υ	γ	Υ
NIYCHUB NEWS YEUWARMIN NOV8-11	WARRY NOV8-11	NY- Astronogane NY	Y	Y	
			,	,	

SCHEDULE VIII—POSITIONS

Name CHARLES B. KANGEL

Page 6 of 6

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

		Manhor of the Board The Kned Koundation	Member of the Board	Position	
		The Kneel Koundation	Men Yort City Empower Tone	Name of Organization	

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement
	NOME	
	, V	